

**DEPARTMENT OF AGRICULTURE  
GRIEVANCE FORM  
(Procedure A)**

Grievance No. \_\_\_\_\_

This form is to be used after the employee has orally taken up the grievance with the immediate supervisor, has had an opportunity for full discussion of the grievance, and has found the supervisor's response to be unsatisfactory at the First Step.

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Employee's Statement: The following grievance occurred on \_\_\_\_\_ and was presented to immediate supervisor on \_\_\_\_\_. I am not satisfied with the answer received on \_\_\_\_\_ and therefore request the grievance be appeared to Step Two of the grievance procedure:

Grievance:

Requested Remedy:

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Employee's Signature

Classification

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Division

Phone Number

Date

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### **Step Two**

Supervisor's Supervisor: The above grievance was received by me  
on \_\_\_\_\_ which was within/not within the five day limit and my  
response is as follows:

\_\_\_\_\_  
Supervisor's Supervisor Signature      Date

( ) I am satisfied with this response and consider grievance to be settled.

( ) I am not satisfied with response and request an appeal to Step Three because:

DEPARTMENT OF AGRICULTURE GRIEVANCE FORM - Procedure A

Page 2

### **Step Three**

Director's Response: The above grievance was received by me  
on \_\_\_\_\_ which was within/not within the five day limit and my  
response is as follows:

\_\_\_\_\_  
Director's Signature      Date

( ) I am satisfied with this response and consider grievance to be settled.

( ) I am not satisfied with response and request an appeal to Secretary of Agriculture  
because:

\_\_\_\_\_  
Employee's Signature      Date

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Secretary of Agriculture

[illegible]

Grievant	Division Director
Immediate Supervisor	Secretary of Agriculture
Supervisor's Supervisor	Personnel Officer

**DEPARTMENT OF AGRICULTURE  
GRIEVANCE FORM  
(Procedure B)**

**This form is to be used after the employee has orally taken up the grievance involving discrimination or sexual harassment with the Department of Agriculture Personnel Officer, has had an opportunity for full discussion of the grievance, and has found the Personnel Officer's response to be unsatisfactory at the first step.**

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\_\_\_\_\_  
Employee's Statement: The following grievance occurred on \_\_\_\_\_ and was presented to the Department of Agriculture's Personnel Officer on \_\_\_\_\_. I am not satisfied with the answer received on and therefore request an appeal to the Secretary of Agriculture.

Grievance:

Requested Remedy:

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\_\_\_\_\_  
Employee's Signature

Classification

Division	Phone Number	Date
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Division	Phone Number	Date
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Division	Phone Number	Date
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## Page 2

### Final Decision

Secretary of Agriculture's Response: The above grievance was received by me on \_\_\_\_\_ which was within/not within the five day limit and my decision is as follows:

Secretary's Signature Date

Distribution: Grievant Division Director  
Immediate Supervisor Secretary of Agriculture  
Supervisor's Supervisor Personnel Officer

